



## COVID-19 Guidance for Service Providers in Planning for Re-Opening of Community-Based Congregate Services

*Effective October 21, 2020*

**Intended Audience:** This guidance is for Organizations that provide community-based congregate meals, caregiver support groups, and health and wellness prevention classes for those who are over age 60 and thus at risk during the COVID-19 pandemic. These Organizations include but are not limited to Area Agencies on Aging (AAAs). The following guidance is designed to maintain health and safety standards and physical distancing measures while providing these services.

**IMPORTANT:** Exclude participants, volunteers and staff from sites if they are showing symptoms of COVID-19, have been in contact with someone with COVID-19 in the last 14 days, have been tested and are awaiting results, or are at high risk due to underlying health conditions.

**Prior to providing services listed above, each Organization employee and volunteer should be trained and thoroughly review this guidance.**

This guidance is based on what is currently known about the transmission and severity of the 2019 novel Coronavirus Disease (COVID-19). The Maine Department of Health and Human Services is working closely with the federal Centers for Disease Control and Prevention (CDC) to provide updated information about the COVID-19 outbreak.

All Providers face specific challenges associated with implementation based on its population, physical space, staffing, etc., and will need to tailor these guidelines accordingly. **This guidance is intended to supplement, not supplant, provisions from regulatory agencies that oversee community service programs.** Providers may develop their own policies and they should never compromise a client's or employee's health.

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## Re-opening Community-Based Congregate Services

Prior to re-opening:

1. Read and learn the available resources:
  - a. [Executive Orders](#)
  - b. [Office of Aging and Disability Services \(OADS\)](#)
  - c. [Mandatory Health & Safety Requirements](#)
  - d. [Model Pre-Screening Health Survey](#)
  - e. [PPE Use Guidance](#)
  - f. [Signage](#)
2. Complete a self-assessment of readiness to reopen based on this guidance.
3. Create a re-opening plan.
4. Submit one statewide re-opening plan to the Office of Aging & Disability Services for review and approval.
5. Perform Staff training:
  - a. [CDC PPE Training](#)
  - b. [CDC Cleaning & Disinfecting Guidelines](#)
6. Obtain PPE & Supplies.
7. Designate a “health officer” on-site responsible for ensuring compliance with the Executive Order and applicable Guidance. This person shall have the authority to stop or modify activities to ensure work conforms with the mandatory health and safety requirements.
8. Take steps to ensure that all water systems and the health/cooling systems environment are safe to use after a prolonged center shutdown to minimize the risk of illness.
  - a. Water – Centers should follow the available guidance from the CDC.
  - b. Climate Control – Centers should consult with their facility management or whoever provides routine maintenance on their heating/cooling systems for what to do in the event of prolonged closure with regard to cleaning.

## Staff and Volunteers

The following agency employees and volunteers should perform duties that allow them to distance at least six (6) feet from other staff, volunteers and participants:

- Adults **60** years of age and older
- People who have serious underlying medical conditions like:
  - Heart disease
  - Diabetes
  - Lung disease
  - Underlying immune disorders/people with compromised immune systems/people taking immune suppressant medications (examples of these disorders include Rheumatoid Arthritis, Crohn’s Disease, recent cancer treatment) *If individuals have specific questions about their own health conditions—they should contact their medical provider before performing any person-to-person duties.*

- Pregnant women
- People with HIV

**If you have staff or volunteers age 65 or older, or with serious underlying health conditions, encourage them to talk to their healthcare provider to assess their risk and to determine if they should stay home, or be reassigned to work with less participant contact.**

## Facial Coverings

**It is required that all staff and volunteers wear cloth facial coverings while providing services, and that participants wear cloth face coverings.** CDC recommends cloth facial coverings in settings where other physical distancing measures are difficult to maintain, especially in areas of significant community-based transmission. Family or caregivers doing drop-off and pick-up are strongly encouraged to wear cloth facial coverings. Instructions for wearing and making cloth facial coverings can be found on the [CDC website](#).

## Health Screening

- The center should keep track of all people attending the center each day (date, name, phone number) in case there is need for future contact tracing. This could be done via database, spreadsheet, paper sign-in sheet, etc. Attendance records must be retained for 30 days.
- Signs must be posted at all entrances clearly indicating that no one may enter if they have symptoms of respiratory illness.
- Ideally, if getting a ride, the same designated person should drop off and pick up the participant every day.
- Consider staggering arrival and drop off times and/or plan to limit direct contact with the participant's designated persons, as much as possible.
- Hand hygiene stations should be set up at the entrance of each site or the entrance process could be rerouted through a different entrance nearest the sink, so that participants can wash their hands before they enter, or immediately upon entry into the center. At minimum, hand sanitizer should be available at all entrances.
- The participants' designated persons who are self-quarantining due to close contact with a COVID-19 positive individual should NOT provide drop-off or pick-up.

## Daily Health Self-Check

- Participants, staff and volunteers conduct a **Daily Health Self-Check** prior to arrival to the center each day. See the [Pre-Screening Health Survey](#) template attached.
  - Have they been in close contact with a person who has COVID-19?
  - Do they have a temperature?

- Do they feel unwell with any symptoms consistent with COVID-19? *For example, have they had a cough, fever, shortness of breath, difficulty breathing, chills, fatigue, repeated shaking with chills, muscle pain or body aches, headache, sore throat, new loss of taste or smell, congestion or runny nose, nausea, vomiting or diarrhea?*
- Have they traveled into Maine in the past 14 days from any other state or country? ([Maine CDC Guidance](#))
- Conduct the same **Daily Health Check** on participants, staff and volunteers upon arrival to the center each day.

## Temperature Check Protocol

Health screening should occur upon entrance and near sink or sanitation station. You should:

- Wash hands
- Wear a cloth facial covering and a single pair of disposable gloves
- Check each participant's temperature
- If performing a temperature check on multiple participants, ensure that a clean pair of gloves is used for each participant and that the thermometer has been thoroughly cleaned in between each check. *If disposable or non-contact thermometers are used and the screener did not have physical contact with a participant, gloves do not need to be changed before the next check. If non-contact thermometers are used, they must be cleaned routinely. Follow instructions provided by the manufacturer for any device used.*

## Participants Attending Community-Based Congregate Services

It is recommended that each agency prioritize participation for people who are at lower risk, are able to wear a mask or face covering while at the center and are able to understand and follow distancing and hand hygiene protocol. Participants are encouraged to talk to their healthcare provider to assess their individual risk and to determine if they should attend the center.

- Persons with COVID-19 who have symptoms and were directed to care for themselves at home may discontinue isolation under the following conditions:<sup>1</sup>
  1. At least **10 days\*** have passed since symptom onset; **and**
    - a. \*A limited number of persons with severe illness may produce replication-competent virus beyond 10 days, that may warrant extending duration of isolation for up to 20 days after symptom onset. Consider consultation with infection control experts.

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<sup>1</sup> <https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html#:~:text=Persons%20with%20COVID%2D19,Other%20symptoms%20have%20improved.>

2. At least 24 hours have passed since resolution of fever without the use of fever-reducing medications; **and**
  3. Other symptoms have improved.
- If symptoms begin while at the site, the participant must be sent home as soon as possible. Keep sick participants separate from well participants and limit staff and volunteer contact as much as reasonably possible, while ensuring the safety and supervision of the participant until they leave.
    - Staff and volunteers should wash their hands, neck, and anywhere touched by a participant's secretions.
    - Contaminated clothes should be placed in a plastic bag or washed in a washing machine.
  - People with a temperature greater than 100.4 F must be sent home until they have had no fever for 72 hours without the use of fever-reducing medications (e.g., Advil, Tylenol).
  - Items and furniture touched by a person who was sent home, must be thoroughly cleaned and disinfected.
  - Participants who arrive from out-of-state must follow state guidelines for leisure travel prior to attendance.

## **Group Size Guidance**

The limit on the number attending/present at the same time (including staff and volunteers) in a center-based Community Support Program site is no more than 50 individuals or 50 percent of permitted occupancy – whichever is less.

1. Social distancing must always allow for at least six (6) feet between people for health and safety.
2. Suggested best practice: Break up the attendees into groups of ten (10) (individuals and staff) to receive services in the setting with the following:
  - Separate bathrooms to be used for each distinct group.
  - Separate entrances/exits to be used for each distinct group.
  - Separate assigned staff for each distinct group.
  - No common use of kitchens, break rooms, or conference rooms.
  - Each room/area should have full walls to the ceiling and doors that can be closed.

## **Cases of COVID-19 in Participants, Volunteers, and Staff**

- If staff had close contact (within 6 feet for 30 minutes or more) with a person who tested positive for COVID-19 while they were symptomatic or within 48 hours before their symptoms started:
  - They need to quarantine at home/room for 14 days.

- Take their temperature 2x per day and monitor for fever, cough, or difficulty breathing.
- If staff have had contact (within 6 feet for less than 30 minutes) with a person who has tested positive for COVID-19 while they were symptomatic OR within 48 hours before their symptoms started OR If they have been in the same room (more than 6 feet away) at the same time as a person who tested positive:
  - o No quarantine is recommended.
  - Monitor for symptoms for 14 days and contact healthcare provider if symptoms develop.
- If staff have been in a room at a different time than a person who tested positive:
  - No action is needed. You are not considered a contact.
- If staff have had contact with someone who has been in contact (no direct contact) with a person who has tested positive.
  - No action is needed.
- Provide PPE, such as a face mask, for a resident exhibiting symptoms of COVID-19. Staff or family members that are in the same room as the individual should wear a face mask and stand at least 6 feet away.
- In a confirmed case, close off all areas used by the ill person. If the exposed area(s) can be isolated, the remainder of the facility may remain open.
- If an employee tests positive follow the CDC guidelines here <https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/hcp-return-work.html> to determine when an employee may safely return to work.

## Healthy Hand Hygiene Behavior

1. All participants, staff, and volunteers should engage in hand hygiene at the following times:
  - Arrival to the center
  - After breaks
  - Before and after preparing food or drinks
  - Before and after eating or handling food, or helping participants eat
  - Before and after administering medication or medical ointment
  - After assisting with personal care
  - After using the toilet or helping a participant use the bathroom
  - After coming in contact with bodily fluid
  - After handling animals or cleaning up animal waste
  - After going outdoors
  - After sensory activities
  - After handling garbage
  - After cleaning
2. As much as possible, have plenty of hand lotion to support healthy skin.
3. Wash hands with soap and water for at least 20 seconds. If hands are not visibly dirty, alcohol-based hand sanitizers with at least 60% alcohol can be used if soap and water

are not readily available. Follow these 5 steps for hand washing or hand sanitizing every time.

- Wet your hands with clean, running water (warm or cold), turn off the tap with paper towel and apply soap.
  - Lather your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.
  - Scrub your hands for at least 20 seconds. Need a timer? Hum the “Happy Birthday” song from beginning to end twice.
  - Rinse your hands well under clean, running water.
  - Dry your hands using a clean towel or air dry them.
4. Assist participants with handwashing who cannot wash hands alone.
  5. After assisting participants with handwashing, staff should also wash their hands.
  6. Place posters describing handwashing steps near sinks. [Developmentally appropriate posters](#) in multiple languages are available from CDC.

## Cleaning & Disinfecting

Agencies should engage in frequent thorough cleaning each day. **At a minimum, common spaces, such as kitchen and frequently touched surfaces and doors should be cleaned and disinfected at the beginning, middle and end of each day.** Staff must be provided with necessary cleaning supplies and the cleaning supplies must be utilized to ensure that regular cleaning/disinfecting occurs as specified in [CDC Re-Opening Guidance](#).

1. Clean and disinfect frequently touched objects and surfaces such as:
  - All surfaces especially where participants eat
  - Bathrooms
  - Frequently used equipment including electronic devices
  - Door handles and handrails
  - Items participants touch
2. Objects that cannot be cleaned and sanitized should not be used.
3. Books, art supplies and other paper-based materials such as mail or envelopes, are not considered high risk for transmission and do not need additional cleaning or disinfection procedures. Books can be returned to shelves 3 days after being returned.

The following products may be used for disinfecting:

- Diluted household bleach solutions
- Alcohol solutions with at least 70% alcohol
- Most common EPA-registered household disinfectants
- See [List N: Disinfectants for Use Against SARS-CoV-2](#)



## **Food Preparation and Meal Service**

1. Wherever possible, food preparation should not be done by the same staff who provide personal care.
2. Sinks used for food preparation should not be used for any other purposes.
3. Staff should ensure participants wash their hands before eating.
4. Staff must wash their hands before preparing food and after helping participants eat. Hand sanitizer may be used in place of washing hands before assisting the next participant with eating.

## **Additional Resources**

- [GENERAL QUESTIONS ABOUT COVID-19? DIAL 2-1-1](#)
- [MAINE CDC COVID-19 SITE](#)
- [MAINE OFFICE OF AGING & DISABILITY COVID-19 SITE](#)

## Provider Assurance Form

The following assurances are required from a provider of Community-Based Congregate Services, for each setting where services will continue or resume.

1. **Settings:** Providers may provide services in either a congregate and/or individualized setting. For purposes of completing this Provider Assurance Form, a provider that operates multiple settings should identify and list them all on a single Form. Additionally, providers with disperse settings where or primarily take place in community-based places should list this information on the Form as one setting (not multiple locations) (such as the provider's headquarters location).
2. **Submission of Completed Form:** Completed Provider Assurance Forms must be submitted electronically to the Maine Department of Health and Human Services, Office of Aging and Disability Services (OADS) at the following e-mail address:
  - a. [James.Moorhead@maine.gov](mailto:James.Moorhead@maine.gov)
  - b. [Michelle.Cloutier@maine.gov](mailto:Michelle.Cloutier@maine.gov)
3. **Receipt and Confirmation:** Once a properly completed Provider Assurance Form is received, OADS will confirm receipt by return e-mail to be provided within one business day.
4. **Services:** Providers may resume providing services once a properly completed Provider Assurance Form is submitted to OADS and a confirmation e-mail has been received by the provider. For providers who have maintained services throughout the state of emergency, those services may continue as long as the provider promptly completes and submits the required Provider Assurance Form to OADS.

### Provider Assurance:

By completing and signing this Provider Assurance Form, the provider acknowledges reading and agreeing to follow, at all of its congregate and/or individualized settings, the health and safety practices and requirements set forth in the *COVID-19 Guidance for Service Providers in Planning for Re-Opening of Community-Based Congregate Services* document prepared by OADS, as amended.

Provider Name:

Main Office Address:

1. Setting Name:
  - a. Street/Town located:
  - b. Service(s) Provided in Setting:
  - c. Setting Phone Number/e-mail
  - d. Date to Open:
2. Setting Name:
  - a. Street/Town located:
  - b. Service(s) Provided in Setting:

- c. Setting Phone Number/e-mail
  - d. Date to Open:
- 3. Setting Name:
  - a. Street/Town located:
  - b. Service(s) Provided in Setting:
  - c. Setting Phone Number/e-mail
  - d. Date to Open:
- 4. Setting Name:
  - a. Street/Town located:
  - b. Service(s) Provided in Setting:
  - c. Setting Phone Number/e-mail
  - d. Date to Open:
- 5. Setting Name:
  - a. Street/Town located:
  - b. Service(s) Provided in Setting:
  - c. Setting Phone Number/e-mail
  - d. Date to Open:
- 6. Setting Name:
  - a. Street/Town located:
  - b. Service(s) Provided in Setting:
  - c. Setting Phone Number/e-mail
  - d. Date to Open:

Please indicate the Section of Policy(ies) that services are provided **(check all that apply)**:

- ☐ OADS Policy Section 65 – Nutrition Services
- ☐ OADS Policy Section 68 – Respite Care Services for Adults with Alzheimer's Disease or Related Disorders
- ☐ OADS Policy Section 75 – Family Caregiver Support Program

**Acknowledgment of and attestation to the above statements:**

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Printed Name

Title

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Signature (e-signature acceptable)

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Date (M/D/Y)



## Pre-Screening Health Survey

### PRE-SCREENING HEALTH SURVEY FOR EMPLOYEES, VOLUNTEERS, AND VISITORS ENTERING FACILITIES DURING COVID-19 PANDEMIC

TODAY'S DATE: \_\_\_\_\_

PLEASE READ EACH QUESTION CAREFULLY	PLEASE CIRCLE THE ANSWER THAT APPLIES TO YOU	
<p>Have you experienced any of the following symptoms in the past <b>48 hours</b>?</p> <ul style="list-style-type: none"> <li>• Fever or chills</li> <li>• Cough</li> <li>• Shortness of breath or difficulty breathing</li> <li>• Fatigue</li> <li>• Muscle or body aches</li> <li>• Headache</li> <li>• New loss of taste or smell</li> <li>• Sore throat</li> <li>• Congestion or runny nose</li> <li>• Nausea or vomiting</li> <li>• Diarrhea</li> </ul>	Yes	No
<p>Within the past <b>14 days</b>, have you been in close physical contact (6 feet or closer for at least 15 minutes) with a person who is known to have laboratory-confirmed COVID-19 or with anyone who has any symptoms consistent with COVID-19?</p>	Yes	No
<p>Are you isolating or quarantining because you may have been exposed to a person with COVID-19 or are worried that you may be sick with COVID-19?</p>	Yes	No
<p>Are you currently waiting on the results of a COVID-19 test?</p>	Yes	No
<p>Did you answer <b>NO</b> to <b>ALL</b> QUESTIONS?</p>	<p>Access to <a href="#">Click or tap here to enter text.</a> <b>APPROVED.</b> Please show this to security at the facility entrance. Thank you for helping us protect you and others during this time.</p>	
<p>Did you answer <b>YES</b> to <b>ANY</b> QUESTION?</p>	<p>Access to <a href="#">Click or tap here to enter text.</a> <b>NOT APPROVED.</b> Please see Page 2 for further instructions. Thank you for helping us protect you and others during this time.</p>	

## THE SCREENING YOU COMPLETED INDICATES THAT YOU MAY BE AT INCREASED RISK FOR COVID-19

IF YOU ARE NOT FEELING WELL, WE HOPE THAT YOU FEEL BETTER SOON!

If you are concerned you have been exposed to COVID-19, **call your healthcare provider**, who will determine whether you should be tested. Decisions to test are left to the clinical judgment of your healthcare provider.

If you do not have a primary care provider, you can visit an urgent care or walk-in facility for care and testing. Always **call before you arrive** to let them know you are coming.

In case of a life-threatening medical emergency, dial 911 immediately!

Source: <https://www.cdc.gov/screening/index.html>